

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	McSoy		10-01-01
O.I.P.E. CLASSIFIER		21	10/10/01
FORMALITY REVIEW	JM	70964	10/23/01
RESPONSE FORMALITY REVIEW	H.L.	1074	02/01/02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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70964  
 10/23/01  
 617  
 2-1-02